

Maryland's Patient Centered Medical Home Pilot At-a-Glance

What is a Patient Centered Medical Home?

The Patient Centered Medical Home concept aims to provide **continuous**, **comprehensive**, **coordinated care**, through a **partnership** between patients and their personal healthcare team. Participating practices will provide patient centered care through:

- Evidence-based medicine;
- Expanded access and communication;
- Wellness and prevention;
- Care coordination and integration; and,
- Culturally and linguistically sensitive care.

Maryland's Patient Centered Medical Home Pilot

The Program is an outgrowth of Maryland's commitment to improve health care quality and reduce health care costs.

- Begins January 2011;
- Three year pilot program overseen by the Maryland Health Care Commission;
- 50 practices, 200 primary care providers, to reach **200,000 Maryland patients**;
- All major carriers (Aetna, CareFirst, CIGNA, Coventry, United HealthCare, Medicaid, and possibly Medicare) will be providing enhanced payments to Pilot practices; and,
- Opportunity for the Pilot practices to earn bonus payments based on performance.

Payment and Incentive Model for Providers

Carriers will use their traditional fee schedule plus:

- <u>Year 1</u>: A fixed per patient per month (PPPM) payment for enhanced care coordination and practice transformation.
- <u>Year 2</u>: A fixed PPPM plus possible additional incentives based on shared savings and quality improvements.

Payments are weighted based on practice size, practice share among Medicaid and private payers, and compliance with NCQA criteria.

Maryland PCMH Pilot Requirements for Providers

- Be a primary care provider in the State of Maryland, which includes internal medicine and family practice physicians, pediatricians, geriatricians, and nurse practitioners who work in solo, group, multi-specialty, hospital-owned group practices, and federally qualified health centers;
- Submit an expression of interest by August 31, 2010;
- Apply to join the Pilot by October 2010;
- Complete a provider contract with the PCMH Pilot;
- Obtain NCQA Level 1+ Recognition by June 2011 and obtain NCQA Level 2+ Recognition by June 2012;
- Accept insurance from at least two participating private carriers and enroll at least 50% of their patients in the Pilot;
- Attend the learning collaborative sessions that will be held throughout the course of the pilot;
- Participate in the multi-year evaluation; and
- Provide the specified services set forth in the Requirements table, which has not yet been finalized.

Maryland PCMH Practice Participation Requirements**

^{**}These requirements are not yet finalized.

Key Dates:

June 2010	Outreach symposia for providers begin.
August 31, 2010	Deadline for practices to submit an expression of interest in pilot participation. Providers must notify MHCC if they are interested in participating.
October 8, 2010	Deadline for practices to submit application to participate.
October 29, 2010	Selection committee announces participating practices.
Nov. 5, 2010	Deadline for carriers to sign participation agreement.
Nov 29, 2010	Deadline for practices to sign participation agreement.
January 4, 2011	Launch of practice transformation and learning collaborative.
January 2011	Carriers provide enrollee rosters for attribution.
February 2011	MHCC releases patient attribution results.
March 2011	Private carriers and Medicare begin paying PPPM fixed payments to practices that attest to meeting NCQA criteria.
June 30, 2011	Deadline to submit applications to NCQA's Physician Practice Connections— Patient-Centered Medical Home for recognition.
July 2011	PCMH practices begin receiving payments from Medicaid MCOs.